

SS. Dopyda
Copy copy available
Isle of Man Board of Education

ANNUAL REPORT

of the

Principal
School Medical Officer
for the year ended .

31st December, 1970

S. V. CULLEN, M.B., Ch.B., D.C.H.
Principal School Medical Officer

Isle of Man Board of Education

ANNUAL REPORT

of the

Principal
School Medical Officer

for the year ended

31st December, 1970

S. V. CULLEN, M.B., Ch.B., D.C.H.

Principal School Medical Officer

CONTENTS.

	Page		Page
Blind Children	13	PART I	
Chest Conditions	10	A—Periodic Medical Inspections, Classification of Physical condition and Individual Children requiring treat- ment	17
Deaf Children	14	B—Other Inspections	17
Defective Hearing	9	C—Infestation with Vermin	17
Dental Defects	10		
Ear, Nose and Throat Defects ...	9	PART II	
Educationally subnormal Children	14	RETURN OF DEFECTS	
Employment of School Children	13	A—Periodic Inspections	18
Epileptics	14	B—Special Inspections	19
External Eye Disease	8		
Handicapped Pupils	13	PART III	
Hygienic Condition of Schools ...	6	A—Eye Diseases, Defective Vision and Squint	19
Infectious Diseases	12	B—Diseases and Defects of Ear, Nose and Throat	20
Maladjusted Children	5 & 15	C—Orthopaedic and Postural Defects	20
Medical Inspection	6	D—Diseases of the Skin	20
Mentally Handicapped Children	14	E—Child Guidance Treatment ...	20
Milk and School Meals	12	F—Speech Therapy	20
Minor Ailments	8	G—Other Treatment	20
Orthopaedic Defects	11		
Physical Condition	7	PART IV	
Physically Handicapped Children	15	Dental Inspection and Treatment	21
Preliminary	5		
Special Medical Examinations ...	13		
School Meals	12		
Speech Defects	15		
Staff	4		
Tuberculosis	10		
Uncleanliness	8		
Visual Defects	8		
Partially Sighted Children	13		
Partially Hearing Children	14		

SCHOOL HEALTH REPORT

TO THE CHAIRMAN AND MEMBERS OF THE ISLE OF MAN
BOARD OF EDUCATION

I beg to submit for your consideration my report on the work of the school health service during the year ended 31st December, 1970.

There were few staff changes during the year. Mr. H. D. Jones, school dental officer, retired in April having served the children of the Island with understanding and care from the time of his appointment in 1960. He was succeeded by Mr. A. D. Torry who took up his duties in July.

Mrs. J. E. Bayliss, speech therapist, commenced duty in January, her time being shared equally by the school health service and the Health Services Board.

I wish to express my thanks to Mr. F. Bickerstaff, the Director of Education, and his staff and to the teaching staffs of the schools for their help and co-operation and to the members of the medical profession who, by their co-operation, have once again contributed to the work of the school health service.

A tribute is also due to all the members of the school health service for their hard work during the year. In particular, I should like to thank Mrs. K. M. Vernon for her loyal and conscientious help.

In conclusion, I acknowledge with gratitude the interest and support of the members of the Board of Education and the Special Services Committee which are so essential to the continued progress of the school health service.

S. V. CULLEN,
Principal School Medical Officer.

Isle of Man Board of Education

SCHOOL HEALTH SERVICE

Report for the Year 1970

STAFF

FULL TIME.

Principal School Medical Officer :	S. V. Cullen, M.B., Ch.B., D.C.H.
School Nurses :	Mrs. H. Parry, S.R.N. Mrs. H. Regan, S.R.N., R.F.N., S.C.M., H.V. Mrs. C. M. Palmer, S.R.N. Mrs. K. E. Rowe, S.R.N.
Principal School Dental Officer :	Kathleen E. Smith, B.D.S.Hons., L.D.S.
School Dental Officers :	H. D. Jones, L.D.S. (Retired 5/4/70). T. R. Hoggins, R.D., L.D.S., R.C.S. F. W. Cannell, B.Sc., B.D.S. A. D. Torry, L.D.S. (From 1/7/70)
Dental Surgery Assistants :	Miss H. M. Costain, R.D.S.A. Mrs. Q. King, R.D.S.A. Mrs. P. M. Quirk. Mrs. M. Hardy.
Clerks to the Medical Department :	Miss V. Devereau. Mrs. C. S. Hutchin Miss L. Clague

PART TIME.

School Medical Officer :	Kathleen M. Vernon, B.Sc., M.B., Ch.B.
Speech Therapist :	Mrs. J. E. Bayliss, L.C.S.T. (From 26/1/70)
Clerk to the Medical Department :	Mrs. L. M. Bridson (temporary).

CONSULTANTS.

Aural Surgeon :	W. M. Owen, F.R.C.S., D.L.O.
Ophthalmic Surgeon :	J. W. R. Sarkies, M.R.C.S., L.R.C.P., D.O.M.S.
Orthopaedic Surgeon :	H. G. Almond, M.Ch.(Orth.), F.R.C.S.
Radiologist :	B. B. Harrison, M.B., Ch.B., M. Rad., D.M.R.D.

PHYSIOTHERAPIST :	J. I. Mellor, M.C.S.P., S.R.P.
-------------------	--------------------------------

PRELIMINARY

The proposed re-organisation of the National Health Service in England contains no specific recommendations in respect of the school health service and discussions continue on how and by whom the service will be administered. Whatever conclusions are drawn in England may well affect the future of the school health service in the Isle of Man and serious consideration will have to be given to any recommendations made. If the National Health Service is re-organised to include public health services, the school health service will have to be included so that essential co-ordination is achieved. In the Isle of Man, the school health service already exists as a comprehensive children's service and includes pre-school children as well as adolescents and schoolchildren and there is every reason why it should continue to exist as the specialised service it is no matter who exercises overall control.

The children's psychiatric service under the control of the consultant psychiatrist continued to be held at the Murray's Road clinic at weekly intervals. The team which at present consists of a psychiatrist and a social worker is short of the services of an educational psychologist who could make a valuable contribution to the case conferences on the children referred for treatment. There is a national shortage of educational psychologists and although arrangements have already been made to make an appointment, further difficulties are likely to be encountered before the vacancy is filled.

More than half the children seen at the psychiatric clinic were of primary school age and were referred by their own doctors or the school medical officers because of behaviour or educational problems such as failure to progress in school. Emotional disorders and failure to adjust socially are problems which are not confined entirely to teenagers and early recognition of behaviour disorders and prompt treatment combined with understanding and sympathy is of prime importance if serious long-term problems and failure in school are to be avoided. Problem children are found in both the infants and junior schools and one wonders whether lax parental discipline before the child is old enough for school followed by a tendency to opt out of responsibility and leave it to the teacher as soon as the child starts school may not be responsible in some measure and in some cases.

The problem of plantar warts (verrucae) has been referred to in previous reports. Plantar warts, like all other varieties of wart, are caused by a virus infection and although they can be very troublesome and can have a high nuisance value, there is no evidence that they have any complications. There is, however, evidence to show that their incidence has increased on the Island as well as nationally and this is not surprising as children are frequently infected at swimming baths and since the two new swimming baths opened here the number of children swimming has grown. Many methods of treatment have been tried in the past and the use of a special plaster cap was introduced at the school clinics this year in an effort to reduce the incidence of infection and also to lessen the time taken to effect a cure. The plaster cap method is relatively painless for the patient and is also less time consuming for the school nurse. Until they are cured, patients are forbidden swimming and the baths managers in both Ramsey and Douglas have been most co-operative in

excluding children suspected of suffering from verrucae. This, combined with frequent foot inspections in school and the co-operation of the school staff, gives rise to hope that the incidence of this condition will be considerably reduced.

A new Medical Officer of Health is to be appointed in 1971 and her appointment is welcomed. She can be assured of the complete co-operation of all members of the school health service staff.

SCHOOL ACCOMMODATION AND HYGIENE

I am indebted to the Works Inspector for the following report :—

“During the year the following schools were painted externally:—Willaston, St. Thomas’ C.E., Marown, Sulby, Kirk Michael and Ramsey Grammar School (Junior Department).

The following schools were partially decorated internally :—Onchan, Demesne Road, Tynwald Street, Ramsey Grammar School (Junior and Senior Departments), Victoria Road, High School for Girls (Park Road)—dining room and several classrooms, Ballakermeen, Laxey, Dhoon, Ballaugh and Andreas.

A large and varied amount of structural repairs, maintenance and improvements was carried out at various schools including the following:—modernisation of classrooms, new floors and corridor tiling at Onchan School, modernisation of electric lighting and power circuits at the High School for Boys (St. Ninian’s) and at the High School for Girls (Park Road), macadamising of playgrounds at Laxey and St. Maughold’s schools, modernisation of lighting—mainly Assembly Hall—at Rushen School and modernisation of staff and children’s toilets at Tynwald Street School.

An extension comprising new children’s and staff toilets, headmaster’s room and classroom was commenced at St. John’s School and is due for completion in July, 1971. Four sectional huts to assist in storage problems were erected at the Dhoon, St. Maughold’s, Santon and Arbory schools. The new extensions to Castle Rushen High School, High School for Girls (Ballakermeen), and Ballasalla schools were completed and occupied during the year and the new infants school situated in Stoney Road, Douglas, was commenced and is due for completion in April, 1971. In addition to the above the new infants school at Rushen and the extension to Peel School were commenced and are scheduled for occupation in September, 1971.

Once again during the year a large and varied amount of furniture, apparatus and equipment was purchased, delivered and installed in the various schools, in addition to that necessary to equip the new extensions.”

MEDICAL INSPECTION

Medical inspection of schoolchildren followed the same pattern as in previous years, the children were fully examined in their first year at school, in the primary school at the age of eight and in the secondary

school at the ages of twelve and fifteen. This is in accordance with the Education Act which states that provision must be made for the medical examination of all pupils in maintained schools at appropriate intervals. The school population once again increased, causing a corresponding increase in the number of medical inspections. In view of this increase, consideration may have to be given to replacing the routine medical examination at age eight and twelve by a selective examination, that is, examination of only those children who appear to have some handicapping defect or to be suffering from ill-health. The selection of children for such a "medical" is based on the replies to a questionnaire sent to the parent and on the observation of the child in school by his teacher or the school nurse.

The parents are given every encouragement to be present and it is very pleasing to report that 1,741 (63.75%) responded and that practically all the entrants had an adult present at their five-year-old examination. The presence of the parent gives an opportunity for informal discussion between the teacher, parent and school medical officer which may help to resolve difficulties which sometimes confront children at school. Previous medical reports from hospital or family doctors are also frequently available to help.

The total number of individual children examined in the different age groups was 2,731 and the number found to require treatment was 515 (18.86%). Defects of vision (11.35%) once again produced the highest percentage of the various defects requiring treatment, details of which are given in the statistical tables at the end of this report.

Children discovered with defects are re-examined as re-inspections every other term to which it is not customary to invite the parent unless an interview with the school medical officer has been requested or the school medical officer wishes to discuss a particular aspect of the child's health, or educational progress. The total number of re-inspections was 3,394.

PHYSICAL CONDITION

Assessment of physical condition is part of the routine medical examination during which the child is weighed and measured. Only two categories are defined, "Satisfactory" and "Unsatisfactory" and the decision into which category a child is placed is taken at the end of the medical examination and is the personal opinion of the medical officer of the child's general health and physical condition. Once again no child examined was considered to be of unsatisfactory physical condition and the average heights and weights of these children showed no significant change from those of the previous year.

In spite of this, there are a number of overweight children who generally look as though they are bursting with good health but who should not be classed as satisfactory from the physical condition angle since overweight may lead to various other disabilities later in life. However, they are so classed since they are not among the ill-nourished, underweight and listless group that one pictures as of 'unsatisfactory' physical condition.

MINOR AILMENTS AND CONSULTATION CLINICS

The number of children attending minor ailment clinics showed an increase on the previous year—4,497 children made 7,601 visits to the various clinics. Although these clinics are primarily for the treatment by the school nurses of minor conditions, it is not intended in these clinics to treat children who should be receiving treatment from their family doctor.

Most ailments treated were of minor eye or skin conditions but there was also an increase in the number of cases of scabies treated. With prompt and early treatment, the spread of this condition can be prevented.

There was also an increase in the number of plantar warts (verrucae) treated at the clinics. With modern treatment and improvement of preventive measures there was evidence at the end of the year that the number of new cases presenting at the clinics was beginning to decline.

The clinics are also used for examinations of pre-school children and for special examinations of school-children and then more time may be given and consultations with parents may be less hurried than in a routine session at a school.

UNCLEANLINESS

It is again disappointing to have to report that there are still some children in school with verminous heads. Although the percentage (2.5) infested is still lower than the national average there continue to be certain areas and schools where the number of children with 'dirty' heads is much higher than it should be. The school nurses continue to be as diligent as ever in carrying out inspections in schools and with their advice to parents. It remains the responsibility of the parents to ensure that the hair of their children remains clean but there are some parents who are resistant to persuasion and for whom it may be necessary to adopt sterner measures. The nurses made 44,420 examinations of 8,210 children and 131 visits to homes. 204 children had some degree of infestation.

There is some evidence to suggest that the hair lotion (which is supplied free at the clinics) is not so potent in certain cases as in the past. Experiments are, however, taking place with other preparations to decide which is the most effective in the treatment of this condition.

EYE DISEASES, DEFECTIVE VISION AND SQUINT

The children's eye service under the control of Dr. J. W. R. Sarkies, consultant ophthalmologist, continued to run smoothly and efficiently. Weekly clinics are held at Noble's Hospital especially for children and the school nurses are in attendance. About a fifth of the cases seen were pre-school age children referred mostly for squints, a satisfactory state of affairs since early treatment of this condition is essential. The arrangements which now exist in Noble's Hospital for operative treatment of eye conditions, particularly squints, are most satisfactory and have reduced the waiting list virtually to nil.

101 consultation sessions were held at Noble's Hospital and 581 children (110 under school age) were examined. The number of examinations made was 1,053. Three school and three pre-school children were examined at adult clinics. 18 schoolchildren and 15 pre-school children were referred for operation for squint and 31 children (including 14 pre-school children) had operations at Noble's Hospital. In addition 16 pre-school children and three schoolchildren had minor operations or examination under an anaesthetic in Noble's Hospital. One school child was admitted to St. Paul's eye hospital, Liverpool and one pre-school child admitted to Moorfields hospital, London for a special examination. 129 pairs of spectacles for schoolchildren and 28 for pre-school children were ordered by the eye specialist.

The principal school medical officer continued the refraction clinics for schoolchildren and 340 children were tested, 129 being ordered spectacles. The school nurses treated 274 eye conditions of a minor nature.

I am indebted to Dr. Sarkies for the following report :—

“The weekly clinics for schoolchildren have continued to run smoothly during the past year. I am satisfied that the administrative system for reference of children who develop visual defects is extremely efficient. The regular school inspections ensure that any child developing a defect during school life is quickly spotted, and can therefore be dealt with at the best time, which is early.”

EAR, NOSE AND THROAT CONDITIONS

Mr. W. Mervyn Owen, consultant ear, nose and throat surgeon, made ten visits to the school clinic during the year and I am grateful to him for the following report :—

“The problems presenting at the consultative clinics were in the main, those associated with catarrhal conditions in childhood.

The number referred to the clinic was up to the usual average, and the attendance rate was also satisfactory, the number of non-attendances being extremely small. The situation regarding the waiting list and waiting period for admission for operation leaves much to be desired and is considered to be far too long. This is attributable to the shortage of beds and difficulty in arranging the admission of what is considered to be the optimum number. The matter was again brought to the notice of the hospital committee but it is realised that it cannot be resolved until the present building operations are completed.”

Mr. Owen examined 153 children (25 under school age) and the total number of examinations made was 194. 27 children were seen at Noble's Hospital following operation. 12 operation sessions held at Noble's Hospital dealt with 48 schoolchildren and six pre-school children, most of the operations being for the removal of tonsils and/or adenoids. Mr. Owen also performed two minor operations at the school clinic and one pre-school child was admitted under his care to Clatterbridge Hospital for special investigations. 63 children (including nine under school age) were referred by Mr. Owen for operative treatment.

36 children had special audiometric examinations at Noble's Hospital and four children were provided with hearing aids. 154 children with ear, nose, or throat conditions of a minor nature were treated by the school nurses.

TUBERCULOSIS AND CHEST CONDITIONS

The parents of children in certain age groups at the High Schools are given the opportunity to have them tuberculin tested. Should the test be negative these children then become eligible to receive a protective vaccination with B.C.G. A positive reaction is taken as evidence of previous infection and vaccination is not then required.

229 schoolchildren received B.C.G. vaccination.

Two children were reported by the consultant chest physician as suffering from respiratory tuberculosis. Contacts among the staff and pupils were investigated by the staff of the Chest Clinic and the results were satisfactory in all cases.

41 reports in respect of 24 schoolchildren examined at the Chest Clinic were received and this co-operation is much appreciated. Included in these reports were five children under observation for heart conditions.

For some years it has been the responsibility of the school health service to examine candidates for admission to teachers training colleges. A chest x-ray examination is one of the requirements and 42 candidates had chest x-rays at Noble's Hospital. All were found to be free from lung disease.

SCHOOL DENTAL SERVICE

The Principal School Dental Officer reports on the work of her service as follows :—

“After ten years faithful service as school dental officer, Mr. H. D. Jones retired on April 3rd. We wish him many years of happy retirement in the Isle of Man. The position he vacated at Ballakermeen centre was taken over by Mr. A. D. Torry on July 1st, and we welcome him to the school dental service.

During the year 7,589 children were dentally inspected, 6,983 of them at their schools, the remaining 606 at the four clinics. 1,946 had further examinations in 1970.

4,153 children were found to be in need of treatment and 2,706 accepted school treatment. In all, these patients made 9,249 visits and 1,567 half-day sessions were devoted to their treatment. 62 half-day sessions were devoted to the routine school inspections.

A total of 6,279 teeth was conserved by fillings, of these 5,587 were permanent teeth. 2,954 teeth were extracted, only 808 of these were per-

manent teeth. 500 general anaesthetics were administered. The totals of treatments are all less than those of the previous year, this being accounted for by the loss of treatment sessions through dental officers' illness and by being short one dental officer at Ballakermeen centre for three months.

There were 22 pupils supplied with dentures, the majority of these replace badly broken front teeth. 18 permanent front teeth were also conserved by crowns and 22 were root filled, thus avoiding their extraction. 72 new patients commenced orthodontic treatment for the correction of their irregular teeth and 58 patients continued their treatment from 1969. 59 of this total were completed during the year and nine cases were discontinued through lack of interest and thus co-operation. A total of 87 appliances were provided for this treatment.

Peel dental clinic was re-equipped this year to make it a more modern functional unit. Five general anaesthetic sessions were held there between September and December. 61 children from Peel and area were sent appointments to have their teeth extracted at Peel and 38 children actually attended and were treated."

ORTHOPÆDIC DEFECTS

Mr. H. G. Almond, consultant orthopaedic surgeon made 11 visits to the school clinics and examined 307 children (77 of whom were below school age), the total number of examinations made being 564. Mr Almond has reported as follows:—

"The orthopaedic clinics have continued in their usual very satisfactory manner at Castletown, Ramsey and Douglas, and the separation of these children from the busy hospital clinics is, I think, appreciated by parents. Practically all attend, and there is no worry about the follow-up of any child with a deformity".

16 children (including four pre-school children) had operations by Mr. Almond at Noble's Hospital mostly for leg and foot conditions. Three patients were operated on at Broadgreen Hospital, Liverpool, also by Mr. Almond and one boy had radiotherapy at Clatterbridge Hospital under the care of Dr. Murray Stewart.

Five children (one pre-school age) were in-patients in Noble's Hospital during the year. One boy was transferred to Broadgreen Hospital for further treatment and one was still in hospital at the end of the year. One schoolboy with a spinal condition continued under the care of Professor Roaf in Liverpool, being admitted to the Royal Liverpool Children's Hospital on two occasions for further treatment.

218 children (including 31 pre-school) were treated by the physiotherapist, Mr. J. I. Mellor, and 1,899 treatments were given at the after care clinics held at various schools throughout the Island. These figures do not include treatments given Mr. Almond's in-patients at Noble's Hospital but do include an increasing number of children suffering from asthma being treated by physiotherapy with considerable benefit and relief.

MILK AND SCHOOL MEALS

I am grateful to the Schools Meals Organiser for the following report :—

“In April, 1970 due to rising food costs and overheads in general, the price of the school meals was increased from 1/6d. to 1/9d. per child, but the number of children taking the school meal has continued to rise. The number of meals served in the year has risen to 672,000. The staff employed, full-time and part-time totals 100.

During the year a meals service was established at Jurby School and Pulrose Infants' School. Extensions to the kitchen and dining room at the Douglas High School, Ballakermeen Section, were carried out during the summer holiday to cater for the extra numbers in the girl's section of that school. At Ballasalla School a new servery was constructed and the meals are now served in the new assembly hall which adjoins it.

Consultation has taken place with the Board's architects on the design and fitting up of kitchens and dining rooms in the projected new schools, notably Ballaquayle Infants', Douglas, and Rushen Infants' School.”

Number of Children Staying for School Meals

Onchan	95
St. Ninian's serving: Kewagie, Noble's Hall, Pulrose ...	280
Park Road serving: Murray's Road	144
Braddan	120
Ballakermeen	420
St. Mary's serving: Willaston	275
Laxey serving: Dhoon	170
Peel serving : Foxdale, Marown, St. John's, Patrick	279
Albert Road Meals Centre serving: St. Maughold's, Ballaugh, Andreas, St. Jude's, Bride, Sulby, Kirk Michael and Jurby	420
Ramsey Grammar School Senior Section	186
Ramsey Grammar School Junior Section	180
Victoria Road serving: Ballasalla, Santon	259
Castle Rushen High School	360
Rushen Primary School serving: Arbory	340
Total	3,528

Approximately 2,143 third of a pint bottles of pasteurized milk were delivered daily to schools. About 327 of these were supplied free of charge.

INFECTIOUS DISEASES

The following infectious diseases were notified by the schools:—

Measles	376
Whooping cough	4
Chickenpox	287
Mumps	459
German measles	62
Scarlet fever	10

There was quite a considerable increase in the number of cases of measles and mumps notified and a moderate increase in the number of chickenpox notifications. Although measles vaccine is available through the National Health Service to children there is little evidence to show that large numbers are being vaccinated.

MISCELLANEOUS MEDICAL EXAMINATIONS

To comply with the Board of Education bye-laws all children between the ages of 13 and 15 years engaged in part-time employment require to be medically examined by the school medical officer. 164 employment certificates were issued during 1970.

44 candidates accepted for admission to teachers training colleges and medically examined in accordance with the requirements of the Department of Education and Science were found to be physically fit.

116 examinations of 49 individual children boarded out by the Board of Education were made. 14 special examinations and six special re-inspections of pre-school children with various complaints were carried out.

Other examinations included examinations for admission to special schools and for fitness for dental treatment under general anaesthesia.

HANDICAPPED PUPILS

Blind Children

One youth, an engineering student at the Queen Alexandra College in Birmingham, left college at the end of the winter term having arranged to start work at an engineering factory in Douglas early in 1971. The training college arranged for an official from the Royal National Institute for the Blind to visit the factory to assess the suitability of the youth for the position he was to take up and to give initial training and advice.

Another youth at a residential school in Manchester continued to make satisfactory progress and arrangements were in hand for him to have further training at the Queen Alexandra College.

One younger boy remained in attendance at a primary school but was being considered for admission to a special residential school.

Partially Sighted Children

Of nine partially sighted children attending ordinary schools, one left school during the year having reached school leaving age. Two mentally handicapped children who are also partially sighted attended the special care unit (one left during the year when her parents moved to England).

Three pre-school children were also classed as partially sighted. One of them left the Island to live in England and another child who had other severe physical defects unfortunately died towards the end of the year.

Supervision of six school children with severe myopia continued. One child of pre-school age was noted as suffering from severe myopia.

Deaf Children

Two children with severe degrees of deafness continued to attend a private school in Douglas and to receive speech therapy at the Murray's Road clinic. Both have hearing aids. One deaf boy has speech therapy at the hospital in Scotland where he is an in-patient. One girl who had been withdrawn from a residential school for deaf children in 1968 was re-admitted to a residential school in Liverpool and again failed to settle down. She was withdrawn by her parents on psychological grounds and arrangements were being made at the end of the year to continue her education locally with the help of a new type of hearing aid which made some improvement in her hearing.

One pre-school child continued to remain under the supervision of the Manchester Department of Audiology and Education of the Deaf and to receive speech therapy in Douglas until she was admitted to the nursery department of a school for the deaf in Edinburgh.

Partially Hearing Children

22 school children were classified as partially hearing. During the year two of these children were provided with hearing aids in addition to the 11 already provided with them.

One boy, not in attendance at school because of other handicaps, is also partially deaf and has also been provided with a hearing aid.

Epileptic Children

43 children attending ordinary schools were known to suffer from epilepsy. Of these, three reached school leaving age, two were removed from the epileptic register and one left the Island during the year.

Seven pre-school children were reported to be suffering from epilepsy.

Mentally Handicapped Children

39 children (including five pre-school children) who had been classified as severely mentally subnormal and unfitted for education in ordinary or special schools were in attendance at the junior training centre or special care unit. Of these, one girl left the Island and another reached school leaving age and is reported to be suitably employed. Two children suitable for the training centre were in attendance at a private school and three more were at home with their parents.

One boy, physically as well as mentally handicapped, continued attending a residential special school and another had home teaching.

121 children classed as educationally subnormal were pupils in various schools on the Island. During the year, two left the Island, one was committed to an Approved School, two were taken off the list and 11 reached school leaving age.

14 pre-school children are already noted as likely to be mentally subnormal.

43 children appeared to be maladjusted but one was taken off the list and five left school. Three children under the care of the consultant psychiatrist did not attend school and two of these reached school leaving age in 1970. Two maladjusted boys continued to attend residential schools in England.

One pre-school child has been added to the maladjusted list.

Physically Handicapped

53 children listed as physically handicapped attended ordinary schools—three of these improved and were removed from the register, one died and three left school on reaching school leaving age.

18 children of pre-school age were noted as physically handicapped.

Nine school children and one pre-school child received hospital treatment in Liverpool and the Board of Education was responsible for their education in hospital special schools.

Seven diabetic children (including two who left school) attended ordinary schools.

Speech Defects

Mrs. J. E. Bayliss commenced duty as speech therapist in January, five of her sessions being devoted to children. Mrs. Bayliss has visited the schools at the beginning of term to assess children who are thought to be in need of speech therapy and has reported on clinics as follows:—

“There were five sessions of speech therapy a week this year, two sessions being held fortnightly in Ramsey and Castletown alternately, from the end of April. 41 children received regular treatment in Douglas, 19 in Ramsey and 19 in Castletown. Five pre-school children also received regular treatment.

Three children in Douglas, three in Ramsey, and five in Castletown were kept under observation.

18 children were discharged with satisfactory speech from Douglas, ten from Ramsey, and five from Castletown. One deaf child who had been receiving therapy went away to school.

24 children were on the waiting list for treatment at Douglas and three at Castletown. These children have already been assessed and await vacancies for treatment."

Isle of Man Board of Education

MEDICAL INSPECTION & TREATMENT

Return for Year ended 31st December 1970

PART I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A — PERIODIC MEDICAL INSPECTIONS

Age Groups inspected (By year of Birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected				Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory		Unsatisfactory		For defective vision (excluding squint)	For any other condition recorded at Part II	Total Individual Pupils
		No.	% of Col. 2	No.	% of Col. 2			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1966 and later	25	25	100	—	—	—	3	3
1965	677	677	100	—	—	27	77	93
1964	51	51	100	—	—	3	5	8
1963	29	29	100	—	—	5	1	6
1962	645	645	100	—	—	56	62	104
1961	65	65	100	—	—	5	4	7
1960	22	22	100	—	—	2	2	4
1959	12	12	100	—	—	1	—	1
1958	571	571	100	—	—	86	56	133
1957	51	51	100	—	—	10	6	14
1956	13	13	100	—	—	5	1	6
1955	539	539	100	—	—	101	36	125
1954 and earlier	31	31	100	—	—	9	3	11
Total	2,731	2,731	100	—	—	310	256	515

TABLE B — OTHER INSPECTIONS

Number of Special Inspections ...	536
Number of Re-inspections	4,310
Total ...	4,846

TABLE C — INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	44,420
(b) Total number of individual pupils found to be infested	204
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 86 (2), Education Act, Isle of Man, 1949)	Nil
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 86 (3), Education Act, Isle of Man, 1949)	Nil

**PART II — DEFECTS FOUND BY MEDICAL INSPECTION DURING
THE YEAR ENDED 31st DECEMBER, 1970.
TABLE A — PERIODIC INSPECTIONS**

Defect Code Number (1)	Defect or Disease (2)		Entrants	Leavers	Others	Total
4	Skin	T	5	9	19	33
		O	20	14	44	78
5	Eyes—					
	(a) Vision	T	27	101	182	310
		O	17	19	61	97
	(b) Squint	T	23	1	9	33
		O	17	—	10	27
	(c) Other	T	3	2	6	11
		O	3	3	4	10
6	Ears—					
	(a) Hearing	T	1	2	6	9
		O	8	2	13	23
	(b) Otitis Media	T	—	1	5	6
		O	5	1	10	16
	(c) Other	T	3	—	8	11
		O	14	1	14	29
7	Nose and Throat	T	10	3	16	29
		O	56	11	75	142
8	Speech	T	10	2	13	25
		O	7	—	8	15
9	Lymphatic Glands	T	—	—	—	—
		O	20	1	21	42
10	Heart	T	—	1	2	3
		O	33	10	35	78
11	Lungs	T	2	1	3	6
		O	31	7	45	83
12	Developmental—					
	(a) Hernia	T	1	—	3	4
		O	12	1	8	21
	(b) Other	T	1	3	3	7
		O	12	16	42	70
13	Orthopaedic—					
	(a) Posture	T	1	1	6	8
		O	10	5	17	32
	(b) Feet	T	12	3	26	41
		O	33	15	53	101
	(c) Other	T	9	3	17	29
		O	17	10	26	53
14	Nervous System—					
	(a) Epilepsy	T	1	—	9	10
		O	2	1	1	4
	(b) Other	T	—	1	1	2
		O	1	3	9	13
15	Psychological—					
	(a) Development	T	—	—	2	2
		O	8	14	40	62
	(b) Stability	T	—	1	7	8
		O	17	5	21	43
16	Abdomen	T	2	3	1	6
		O	13	6	17	36
17	Other	T	1	—	2	3
		O	12	19	48	79

T — Pupils found to require treatment : O — Pupils found to require observation

TABLE B — SPECIAL INSPECTIONS

Defect Code Number (1)	Defect or Disease (2)	Special Inspections	
		Requiring Treatment (3)	Requiring Observation (4)
4	Skin	10	11
5	Eyes—		
	(a) Vision	9	18
	(b) Squint	3	—
	(c) Other	2	4
6	Ears—		
	(a) Hearing	4	6
	(b) Otitis Media	4	—
	(c) Other	6	2
7	Nose and Throat	1	12
8	Speech	14	1
9	Lymphatic Glands	—	—
10	Heart	—	2
11	Lungs	3	4
12	Developmental—		
	(a) Hernia	—	—
	(b) Other	1	3
13	Orthopædic—		
	(a) Posture	1	1
	(b) Feet	7	1
	(c) Other	15	23
14	Nervous System—		
	(a) Epilepsy	2	—
	(b) Other	2	9
15	Psychological—		
	(a) Development	1	1
	(b) Stability	8	9
16	Abdomen	8	7
17	Other	18	105

PART III.

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

TABLE A — EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	318
Errors of refraction (including squint)	788
Total ...	1,106
Number of pupils for whom spectacles were prescribed	258

TABLE B — DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	5
(b) for adenoids and chronic tonsilitis	40
(c) for other nose and throat conditions	8
Received other forms of treatment	189
Total ...	242
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1970	4
(b) in previous years	16

TABLE C — ORTHOPÆDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	187
(b) Pupils treated at school for postural defects ...	Not known

TABLE D — DISEASES OF THE SKIN
(excluding uncleanness for which see Table C of Part I)

	Number of cases known to have been treated
Ringworm — (a) Scalp	—
(b) Body	3
Scabies	31
Impetigo	27
Other skin diseases	219
Total ...	280

TABLE E — CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	47

TABLE F — SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapist	79

TABLE G — OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments ..	3,789
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	229
(d) Other than (a), (b) and (c) above	—
Total (a) - (d) ...	4,018

PART IV

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE BOARD DURING THE YEAR ENDED 31st DECEMBER, 1970.

1. ATTENDANCES AND TREATMENT

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
First visit	1,081	1,351	500	2,932
Subsequent visits	1,379	3,641	1,297	6,317
Total visits	2,460	4,992	1,797	9,249
Additional courses of treatment commenced	78	207	60	345
Fillings in permanent teeth	842	3,693	1,701	6,236
Fillings in deciduous teeth	832	21		853
Permanent teeth filled	746	3,365	1,476	5,587
Deciduous teeth filled	676	16		692
Permanent teeth extracted	146	541	121	808
Deciduous teeth extracted	1,632	514		2,146
General anaesthetics	468	210	16	694
Emergencies	110	92	40	242
Number of Pupils x-rayed				415
Prophylaxis				619
Teeth otherwise conserved				642
Number of teeth root filled				22
Inlays				3
Crowns				18
Courses of treatment completed				2,520

2. ORTHODONTICS

Cases remaining from previous year	58
New cases commenced during year	72
Cases completed during year	59
Cases discontinued during year	9
Number of removable appliances fitted	82
Number of fixed appliances fitted	5
Pupils referred to Hospital Consultant	—

3. PROSTHETICS

	Ages 5 to 9	Ages 10 to 14	Ages 15 & over	Total
Pupils supplied with F.U. or F.L. (first time)	—	—	—	—
Pupils supplied with other dentures (first time)	2	8	12	22
Number of dentures supplied ...	2	13	12	27

4. ANAESTHETICS

General anaesthetics administered by dental officers ...	500
--	-----

5. INSPECTIONS

(a) First inspection at school. Number of pupils.....	6,983
(b) First inspection at clinic. Number of pupils.....	606
Number of (a) and (b) found to require treatment	4,153
Number of (a) and (b) offered treatment	2,706
(c) Pupils re-inspected at school or clinic	1,946
Number of (c) found to require treatment	1,430

6. SESSIONS

Sessions devoted to treatment.....	1,567
Sessions devoted to inspection	62

